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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/318,056 09/07/2001

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 01/30/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 18	TOTAL CLAIMS 55	INDEPENDENT CLAIMS 10
Verified and Acknowledged	Examiner's Signature	Initials			

ADDRESS

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TITLE

Infusion device and inlet structure for same

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)